Case 17-82919 Doc 1 Filed 12/13/17 Entered 12/13/17 10:59:54 Desc Main Document Page 1 of 52

| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: | Identify Yourself | | |
|----|--------------------|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your | e the name that is on government-issued ure identification (for mple, your driver's | Julio First name | First name |
| | | ise or passport). | Middle name | Middle name |
| | iden | g your picture tification to your ting with the trustee. | Delreal Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | | ide your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number | xxx-xx-2508 | |

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Case number (if known)

Debtor 1 Julio Delreal

| | | About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): | | | |
|----|---|---|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | |
| | | EINs | EINs | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | |
| | | 624 Kent Street Rockford, IL 61102 | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Winnebago | | | |
| | | County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | |

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Debtor 1 Julio Delreal

| ar | Tell the Court About | Your B | ankruptcy Ca | se | | | | |
|-----|---|------------|-----------------|-----------------------------------|--|---|---|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> f page 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Ba e box. | ankruptcy | |
| | choosing to file under | ■ C | hapter 7 | | | | | |
| | | □с | hapter 11 | | | | | |
| | | □с | hapter 12 | | | | | |
| | | □с | hapter 13 | | | | | |
| | | | | | | | | |
| 3. | How you will pay the fee | | about how yo | u may pay. Typ attorney is sub | pically, if you are paying the fee yo | k with the clerk's office in your local court for rourself, you may pay with cash, cashier's checalf, your attorney may pay with a credit card or | k, or money | |
| | ☐ I need to pay the fee in installments. If you choose this option, sign and a The Filing Fee in Installments (Official Form 103A). | | | | | on, sign and attach the Application for Individu | attach the Application for Individuals to Pay | |
| | | | | | | n only if you are filing for Chapter 7. By law, a | | |
| | | | | | | our income is less than 150% of the official poun in installments). If you choose this option, you i | | |
| | | | the Application | n to Have the (| Chapter 7 Filing Fee Waived (Office | cial Form 103B) and file it with your petition. | | |
| | | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No | | | | | | |
| | last 8 years? | □ Ye | | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 10. | Are any bankruptcy | ■ No | n | | | | | |
| | cases pending or being filed by a spouse who is | Y€ | | | | | | |
| | not filing this case with you, or by a business partner, or by an affiliate? | | | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your residence? | ■ No | Go to li | ne 12. | | | | |
| | | □Y€ | es. Has yo | ur landlord obta | ained an eviction judgment agains | t you? | | |
| | | | | No. Go to line | 12. | | | |
| | | | | Yes. Fill out Inbankruptcy pe | | Judgment Against You (Form 101A) and file it | with this | |
| | | | | | | | | |

Document Page 4 of 52 Case number (if known) Debtor 1 Julio Delreal Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Julio Delreal Document Page 5 of 52 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 52 Case number (if known) Debtor 1 Julio Delreal Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Julio Delreal Signature of Debtor 2 Julio Delreal Signature of Debtor 1 Executed on December 12, 2017 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Julio Delreal Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Jeffry A Dahlberg Signature of Attorney for Debtor | Date | December 12, 2017 MM / DD / YYYY |
|---|---------------|-------------------------------------|
| Jeffry A Dahlberg Printed name | | |
| Balsley & Dahlberg Firm name | | |
| 5130 North Second Street Loves Park, IL 61111 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone | Email address | |
| 6206776 | | |
| Bar number & State | | |

| | 17(7(1))) | .111 1 7000 . 13 (11 . 17 | |
|--------------------------|-------------------------------------|--|---|
| mation to identify your | case: | | |
| Julio Delreal | | | |
| First Name | Middle Name | Last Name | |
| | | | |
| First Name | Middle Name | Last Name | |
| ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| | | | |
| | Julio Delreal First Name First Name | Julio Delreal First Name Middle Name First Name Middle Name | Tast Name Middle Name Last Name Middle Name Last Name |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | Your as Value o | f what you own |
|--|--|---|
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | | 0.00 |
| | \$ | 10,900.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 10,900.00 |
| 2: Summarize Your Liabilities | | |
| | | abilities t you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 2,400.00 |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 17,959.82 |
| Your total liabilities | \$ | 20,359.82 |
| Summarize Your Income and Expenses | ļ | |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,257.00 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,247.00 |
| 4: Answer These Questions for Administrative and Statistical Records | | |
| Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | nedules. |
| ■ Yes What kind of debt do you have? | | |
| | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | Summarize Your Liabilities Your lia Amount Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

4,129.17 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tota | al claim |
|--|------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| ne 10 of 52 | | 743C 17 02313 B00 | |
|--|--|--------------------------------------|--------------------|
| | nd this filing: | ormation to identify your case | Fill in this info |
| Name | Middle Name Last Name | Julio Delreal First Name | Debtor 1 |
| Tallo | viole Name | ristrante | Debtor 2 |
| Name | Middle Name Last Name | First Name | Spouse, if filing) |
| | HERN DISTRICT OF ILLINOIS | Bankruptcy Court for the: NOR | Jnited States I |
| ☐ Check if this is an | | | Case number |
| amended filing | | | |
| | | | |
| | | orm 106A/B | Official F |
| 12/15 | 1 | le A/B: Propert | |
| et fits in more than one category, list the asset in the category where you | | • | |
| ling together, both are equally responsible for supplying correct of any additional pages, write your name and case number (if known). | | ore space is needed, attach a sepa | |
| ave an Interest in | or Other Real Estate You Own or Have an I | e Each Residence, Building, Land | Part 1: Describ |
| or similar property? | t in any residence, building, land, or simila | r have any legal or equitable intere | . Do you own o |
| | | Part 2 | ■ No. Go to F |
| | | e is the property? | _ |
| | | s is the property: | Tes. When |
| | | pe Your Vehicles | Part 2: Describ |
| | | | □ No ■ Yes |
| erty? Check one Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: | Who has an interest in the property? Che | Chevrolet | 3.1 Make: |
| creditors Who Have Claims Secured by Property. | Debtor 1 only | Equinox | Model: |
| Current value of the Current value of the | Debtor 2 only | 2005 | Year: |
| entire property? portion you own? | Debtor 1 and Debtor 2 only | nate mileage: 193,000 | |
| l another | ☐ At least one of the debtors and another | ormation: | Other info |
| \$1,100.00 \$1,100.00 | ☐ Check if this is community property (see instructions) | | |
| Do not deduct secured claims or exemptions. Put | Who has an interest in the property? Che | Chevrolet | 3.2 Make: |
| the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. | Debtor 1 only | Malibu | Model: |
| Current value of the Current value of the | Debtor 2 only | 2005 | Year: |
| entire property? portion you own? | Debtor 1 and Debtor 2 only | nate mileage: 175,000 | Approxim |
| I another | \square At least one of the debtors and another | ormation: | Other info |
| \$800.00 \$800.00 | ☐ Check if this is community property (see instructions) | | |
| | | | |
| other vehicles, and accessories | d other recreational vehicles, other ve | aircraft, motor homes, ATVs a | . Watercraft, |
| | tercraft, fishing vessels, snowmobiles, m | | |
| | | | ■ No |
| | | | |
| | d other recreational vehicles, other ve tercraft, fishing vessels, snowmobiles, m | | |

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 Julio Delreal 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$1,900.00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Misc. household goods and furnishings \$1,700.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... 2 TV's 1 Cell Phone \$500.00 1 Computer 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$600.00 Clothing and personal items 12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

■ No

☐ Yes. Describe.....

13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

No

| | | Case 17-82919 | Doc 1 | Filed 12/13/17 | Entered 12/13 | 3/17 10:59:54 | Desc Main |
|-----|-----------------------------|---|-----------------------------|---|--------------------------|----------------------------|---|
| De | ebtor 1 | Julio Delreal | | Document | Page 12 of 52 | Case number (if known) | |
| | ☐ Yes. (| Give specific information | | | | | |
| 15 | | ne dollar value of all of yort 3. Write that number h | | | | ou have attached | \$2,800.00 |
| Pa | rt 4: Des | cribe Your Financial Assets | i | | | | |
| Do | you ow | n or have any legal or eq | quitable inter | est in any of the follow | ing? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | ■ No | les: Money you have in yo | | | osit box, and on hand w | hen you file your petition | חכ |
| 17. | Exampl | es of money les: Checking, savings, or institutions. If you hav | | al accounts; certificates of counts with the same ins | | edit unions, brokerage h | nouses, and other similar |
| | ■ No □ Yes | | | Institution r | name: | | |
| 18. | | mutual funds, or publicles: Bond funds, investmen | • | | ney market accounts | | |
| | | 1 | nstitution or is | ssuer name: | | | |
| 19. | Non-pul joint ve ■ No | | nterests in in | corporated and uninc | orporated businesses | s, including an interes | t in an LLC, partnership, and |
| | ☐ Yes. (| Give specific information a Nam | about them ne of entity: | | | % of ownership: | |
| 20. | Negotia Non-ne | ment and corporate bond able instruments include per gotiable instruments are the | ersonal check | s, cashiers' checks, pro | missory notes, and mor | ney orders. | |
| | ■ No □ Yes. 0 | Give specific information al Issue | bout them er name: | | | | |
| 21. | | ent or pension accounts les: Interests in IRA, ERIS. | | 1(k), 403(b), thrift saving | s accounts, or other pe | ension or profit-sharing | plans |
| | Yes. L | ist each account separate. Type o | ely. f account: | Institution r | name: | | |
| | | 401(k) |) | Interest in | Fidelity | | \$6,200.00 |
| 22. | Your sh Example | y deposits and prepaymentare of all unused deposits les: Agreements with landles | you have ma | | | | lies, or others |
| | ■ No □ Yes | | | Institution r | name or individual: | | |
| 23. | Annuitie | es (A contract for a period | ic payment of | | | years) | |
| | ■ No □ Yes | Issuer name | and descript | ion. | | | |
| 24. | Interests 26 U.S.C | s in an education IRA, in C. §§ 530(b)(1), 529A(b), a | an account i | | ogram, or under a qua | lified state tuition pro | gram. |
| | ■ No □ Yes | Institution na | ame and desc | cription. Separately file th | ne records of any intere | ests.11 U.S.C. § 521(c): | |

| | | Case 17-82 | 919 | Doc 1 | Filed 12/13/17 Document | Entered 12/13/17 10:59:54 Page 13 of 52 | Desc Main |
|-----|------------------|---|----------------------|-----------------------------|--|---|--|
| De | ebtor 1 | Julio Delreal | | | | Case number (if known) | |
| | ■ No | , equitable or future Give specific inform | | | rty (other than anythin | g listed in line 1), and rights or powers exe | rcisable for your benefit |
| | Examp ■ No | | names | , websites, pr | ts, and other intellectu occeeds from royalties a | al property nd licensing agreements | |
| | Examµ ■ No | es, franchises, and oles: Building permits Give specific inform | s, exclu | sive licenses, | | n holdings, liquor licenses, professional license | es |
| Mo | oney or | property owed to y | ou? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | No | funds owed to you | ation ab | out them, inc | luding whether you alrea | ady filed the returns and the tax years | |
| | Examp ■ No | support ples: Past due or lum Give specific informa | | | isal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| | Examp ■ No | amounts someone oles: Unpaid wages, benefits; unpaid | disabilit d loans | y insurance p | | efits, sick pay, vacation pay, workers' compen | sation, Social Security |
| 31. | Examp | ets in insurance pol ples: Health, disabilit | | insurance; h | ealth savings account (I | HSA); credit, homeowner's, or renter's insuran | се |
| | ■ No □ Yes. | Name the insurance | | ny of each po pany name: | olicy and list its value. | Beneficiary: | Surrender or refund value: |
| | If you a some of | | f a living | | someone who has die t proceeds from a life in: | d surance policy, or are currently entitled to rece | ive property because |
| | Examµ ■ No | | loymen | | rou have filed a lawsui surance claims, or rights | t or made a demand for payment to sue | |
| 34. | Other o | | iquidate | ed claims of | every nature, includin | g counterclaims of the debtor and rights to | set off claims |
| | | nancial assets you o | | already list | | | |
| | | Give specific inform | nation | | | | |

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| Deb | Julio Delreal | | Case number (if known) | |
|--------------|---|------------------------------|------------------------------|-------------|
| 36. | Add the dollar value of all of your entries from Part 4, include for Part 4. Write that number here | | | \$6,200.00 |
| | | | | |
| Part | 5: Describe Any Business-Related Property You Own or Have an Int | erest In. List any real esta | ate in Part 1. | |
| 37. D | o you own or have any legal or equitable interest in any business-rela | ated property? | | |
| | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | |
| Part | 6: Describe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1. | ou Own or Have an Interes | st In. | |
| 46. I | Oo you own or have any legal or equitable interest in any farm | n- or commercial fishir | ng-related property? | |
| | No. Go to Part 7. | | | |
| | Yes. Go to line 47. | | | |
| | Describe All Property You Own or Have an Interest in That You Own bave other property of any kind you did not already lise Examples: Season tickets, country club membership No Yes. Give specific information | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write t | that number here | | \$0.00 |
| Part | 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$1,900.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$2,800.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$6,200.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | + \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$10,900.00 | Copy personal property total | \$10,900.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$10,900.00 |

Official Form 106A/B Schedule A/B: Property page 5

| | | I A A JULIA . | | |
|---------------------|--------------------------|-------------------|-------------|---------------------|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Julio Delreal First Name | Middle Name | Last Name | |
| | Filst Name | wilddie Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | Check if this is an |
| | | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | unt of the exemption you claim | Specific laws that allow exemption | |
|--|--------------------------------------|------|---|------------------------------------|--|
| | Copy the value from Schedule A/B | Chec | ck only one box for each exemption. | | |
| 2005 Chevrolet Malibu 175,000 miles | \$800.00 | | \$800.00 | 735 ILCS 5/12-1001(c) | |
| Ellie Holli Golledale 74 B. G.2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Misc. household goods and furnishings | \$1,700.00 | | \$1,700.00 | 735 ILCS 5/12-1001(b) | |
| Line Holli Schedule A/B. C. I | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2 TV's 1 Cell Phone | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) | |
| 1 Computer Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Clothing and personal items Line from Schedule A/B: 11.1 | \$600.00 | | \$600.00 | 735 ILCS 5/12-1001(a) | |
| Ellie Holli Galledale A.B. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 401(k): Interest in Fidelity Line from Schedule A/B: 21.1 | \$6,200.00 | | 100% | 735 ILCS 5/12-1006 | |
| Line Holli Genedule Av.B. 21. 1 | | | 100% of fair market value, up to any applicable statutory limit | | |

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Debtor 1 Julio Delreal

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

| Ca | ise 17-82919 | | =ntered age 17 | 12/13/17 10: | 59:54 Desc IV | iain |
|---|----------------------------|---|-------------------|--|------------------------|-------------------|
| Fill in this inform | nation to identify yoເ | | 10e 17 | 01.5/ | | |
| | | ii case. | | | | |
| Debtor 1 | Julio Delreal First Name | Middle Name Las | st Name | | | |
| Debtor 2 | i iist ivairie | Middle Name Las | t Name | | | |
| (Spouse if, filing) | First Name | Middle Name Las | st Name | | | |
| United States Ba | nkruptcy Court for the: | NORTHERN DISTRICT OF ILLINO | IS | | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | amend | led filing |
| O(() : 1 E | . 400D | | | | | |
| Official Forn | | | | | | |
| Schedule | D: Creditors | Who Have Claims Se | cured | by Property | y | 12/15 |
| | e Additional Page, fill it | If two married people are filing together, bout, number the entries, and attach it to thi | | | | |
| , , | have claims secured by | v vour property? | | | | |
| ' | • | his form to the court with your other sch | edules. You | ı have nothing else t | o report on this form. | |
| _ | all of the information | • | ,aa.oo. 100 | Thave from ing clock | o roport on the form. | |
| | | Delow. | | | | |
| Part 1: List A | II Secured Claims | | | Column A | Column B | Column C |
| | | more than one secured claim, list the creditor a particular claim, list the other creditors in P | | Amount of claim | Value of collateral | Unsecured |
| | | cal order according to the creditor's name. | art 2. A3 | Do not deduct the value of collateral. | that supports this | portion If any |
| 2.1 Johnny's A | Auto Sales | Describe the property that secures the c | laim: | \$2,400.00 | \$1,100.00 | \$1,300.00 |
| Creditor's Nam | е | 2005 Chevrolet Equinox 193,000 | miles | | | |
| | | | | | | |
| 1529 Harr | ison Avenue | As of the date you file, the claim is: Check | all that | | | |
| Rockford, | | apply. Contingent | | | | |
| <u></u> | , City, State & Zip Code | ☐ Unliquidated | | | | |
| , | , - ,, | ☐ Disputed | | | | |
| Who owes the de | ebt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ■ An agreement you made (such as mortg | gage or secui | red | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and De | ebtor 2 only | ☐ Statutory lien (such as tax lien, mechani | c's lien) | | | |
| ☐ At least one of t | he debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| Check if this cl | | Other (including a right to offset) | | | | |
| Date debt was inc | urred <u>2016</u> | Last 4 digits of account number | | | | |
| | | | | | | |
| Add the dollar va | alue of vour entries in C | column A on this page. Write that number h | ere: | \$2,40 | 0.00 | |
| If this is the last | page of your form, add | the dollar value totals from all pages. | | \$2,40 | | |
| Write that numb | rite that number here: | | | | 0.00 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | Ouse 17 02010 B | Document | Page 18 of 52 | Description |
|-----------------------------------|--|--|---|--|
| Fill in t | his information to identify your ca | | | |
| Debtor | 1 Julio Delreal | | | |
| | First Name | Middle Name | Last Name | |
| Debtor | | Middle Name | Last Name | |
| (Spouse in | i, illing) First Name | Middle Name | Last Name | |
| United | States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS | |
| Case n | umber | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Officia | al Form 106E/F | | | |
| | dule E/F: Creditors Wh | o Have Unsecured | Claims | 12/15 |
| | | | Y claims and Part 2 for creditors with NONPF | |
| ichedule ichedule eft. Atta | e G: Executory Contracts and Unexpire D: Creditors Who Have Claims Secure | d Leases (Official Form 106G). Ded by Property. If more space is r | ist executory contracts on Schedule A/B: Pro to not include any creditors with partially sec needed, copy the Part you need, fill it out, nu port in a Part, do not file that Part. On the top | cured claims that are listed in mber the entries in the boxes on the |
| Part 1: | | | | |
| _ | any creditors have priority unsecured of | claims against you? | | |
| — 1 | No. Go to Part 2. | | | |
| | <u></u> | | | |
| Part 2: | | | | |
| | any creditors have nonpriority unsecu | | | |
| | No. You have nothing to report in this part | . Submit this form to the court with | your other schedules. | |
| | Yes. | | | |
| unse | ecured claim, list the creditor separately for one creditor holds a particular claim, list | or each claim. For each claim listed | e creditor who holds each claim. If a creditor in the creditor is the claim it is. Do not list claim have more than three nonpriority unsecured claim it is. | ns already included in Part 1. If more |
| | | | | Total claim |
| 4.1 | AFNI | Last 4 digits of acco | ount number | \$323.00 |
| | Nonpriority Creditor's Name P.O. Box 3427 | When was the debt | incurred? | |
| | Bloomington, IL 61702-3517 | When was the debt | | |
| | Number Street City State Zlp Code | As of the date you f | file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and anoth | о. П | ITY unsecured claim: | |
| | Check if this claim is for a commu | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arisin report as priority clair | ng out of a separation agreement or divorce that ms | you did not |
| | ■ No | | or profit-sharing plans, and other similar debts | |
| | | | collections for ATT U-Verse, and othe | er misc. |
| | □Yes | Other. Specify | accounts | - |

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| Debio | Julio Deireal | Case number (if know) | |
|-------|---|--|------------|
| 4.2 | AR Concepts Nonpriority Creditor's Name | Last 4 digits of account number | \$252.00 |
| | 18 E Dundee Road, Suite 330 Barrington, IL 60010 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | , | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | DObligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | collections for Mathers Clinic, and other misc. accounts | |
| 4.3 | ATG Credit Inc. | Last 4 digits of account number | \$67.00 |
| | Nonpriority Creditor's Name P.O. Box 14895 Chicago, IL 60614-0895 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify collections for Radiology Consultants of Rockvford, and other misc. accounts | |
| 4.4 | Berks Credit Collection Nonpriority Creditor's Name | Last 4 digits of account number | \$2,339.17 |
| | 900 Corporate Drive Reading, PA 19605 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | | _ collections for Alpine Bank, and other misc. | |
| | Yes | Other. Specify accounts | |

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| Debto | or 1 Julio Delreal | Case number (if know) | |
|-------|--|---|----------|
| 4.5 | CBE Group | Last 4 digits of account number | \$99.48 |
| | Nonpriority Creditor's Name 1309 Technology Pkwy Cedar Falls, IA 50613 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify collections for Comcast Cable, and other misc. accounts | |
| 4.6 | Chase Bank Nonpriority Creditor's Name | Last 4 digits of account number | \$70.99 |
| | 340 S Cleveland Ave Bldg 370 Westerville, OH 43081 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify bank charges | |
| 4.7 | Chase Card Nonpriority Creditor's Name | Last 4 digits of account number 4492 | \$200.00 |
| | P.O. Box 15298 Wilmington, DE 19850 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not | |
| | _ | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ■ No | | |
| | ☐ Yes | ■ Other. Specify misc. charges | |

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| Debt | or 1 Julio Delreal | Case number (if know) | |
|------|---|--|------------|
| 4.8 | Commonwealth Edison Company Nonpriority Creditor's Name | Last 4 digits of account number 4085 | \$340.67 |
| | Attention: Legal Department 3 Lincoln Center, 4th Floor Oak Park Terrace, IL 60181-4204 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify utilities | |
| 4.9 | Creditors' Protection Service Nonpriority Creditor's Name | Last 4 digits of account number | \$1,969.43 |
| | 308 W State St Suite 485 P.O. Box 4115 Rockford, IL 61110-0615 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | $\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify collections for misc. accounts | |
| 4.1 | Crusader Clinic | | \$312.60 |
| 0 | Nonpriority Creditor's Name | Last 4 digits of account number | ψ312.00 |
| | 1200 West State Street Rockford, IL 61102 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify medical | |

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| Jebioi i Juli | o Deireai | Case number (if know) | |
|------------------|---|---|------------|
| Hy Cit | te Corporation/Royal Prestige | Last 4 digits of account number 1321 | \$549.00 |
| 333 H | ority Creditor's Name ofman Road | When was the debt incurred? | |
| Number | on, WI 53713 r Street City State Zlp Code curred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| _ | tor 1 only | ☐ Contingent | |
| _ | tor 2 only | ☐ Unliquidated | |
| | tor 1 and Debtor 2 only | ☐ Disputed | |
| | east one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ck if this claim is for a community | ☐ Student loans | |
| debt | laim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | | ■ Other. Specify Possible liability on contract | |
| I.C. S | ystems Inc | Last 4 digits of account number | \$350.00 |
| | ority Creditor's Name | | |
| P.O. E | ast Highway 96 3ox 64437 Paul, MN 55164-0437 | When was the debt incurred? | |
| | r Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | curred the debt? Check one. | , | |
| ■ Deb | tor 1 only | ☐ Contingent | |
| ☐ Deb | tor 2 only | ☐ Unliquidated | |
| ☐ Deb | tor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At le | east one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Che | ck if this claim is for a community | ☐ Student loans | |
| debt Is the c | laim subject to offset? | $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | | ■ Other. Specify _collections for ATT, and other misc. accounts | |
| .1 Mutua | al Management Services Inc | Last 4 digits of account number | \$2,339.17 |
| Nonprio | ority Creditor's Name Crimson Ridge Drive, Suite 10 | When was the debt incurred? | <u> </u> |
| Rockf | Sox 8740 ord, IL 61126-6235 r Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | curred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| _ | tor 1 only | ☐ Contingent | |
| _ | tor 2 only | ☐ Unliquidated | |
| | tor 1 and Debtor 2 only | ☐ Disputed | |
| _ | east one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ck if this claim is for a community | ☐ Student loans | |
| debt | laim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | | collections for Alpine Bank, and other misc. | |

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Debtor 1 Julio Delreal Case number (if know) 4.1 OSF St. Anthony Medical Group \$83.85 Last 4 digits of account number Nonpriority Creditor's Name 5666 E. State Street When was the debt incurred? Rockford, IL 61108-2472 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify medical 4.1 R & B Receivables Management \$229.35 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 860 Northpoint Blvd. Waukegan, IL 60085 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify collections for misc. accounts ☐ Yes 4.1 Rockford Mercantile Agency Inc \$661.23 Last 4 digits of account number 6 Nonpriority Creditor's Name 2502 S. Alpine Road When was the debt incurred? Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify collections for misc. accounts

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| Debto | r 1 Julio Delreal | Case number (if know) | |
|----------|--|---|------------|
| 4.1 | Secretary of State Nonpriority Creditor's Name | Last 4 digits of account number | \$0.00 |
| | Traffic Unit 2701 South Dirksen Parkway Springfield, IL 62723 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify notice only | |
| 4.1 | State Collection Service | Last 4 digits of account number | \$38.65 |
| | Nonpriority Creditor's Name 2509 S. Stoughton Road Madison, WI 53716 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify collections for misc. accounts | |
| 4.1 9 | Wilber & Associates, P.C. | Last 4 digits of account number | \$7,734.23 |
| | Nonpriority Creditor's Name 210 Landmark Drive Normal, IL 61761 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify collections for Auto Oeners Insurance Company, and other misc. accounts | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Т | otal Claim |
|-----------------------|-----|---|-----|----------|------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total | | | | · | |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | | , | | — | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | 0.00 |
| | | | | Т | otal Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | _ | _ | 0.00 |
| | | you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | 3 p. 1, 1 a. 1 | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 17,959.82 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 17,959.82 |

| | | | III FAUE / 0 UI 3/ | |
|---|--------------------------|-------------------|--------------------|--|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Julio Delreal | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| () | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | • | | | | |

| | | Docume | ent Page 27 d | of 52 | |
|--------------------------|---|--|------------------------|--|--|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Iulia Dalraal | | | | |
| Deptor i | Julio Delreal First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fili | ng) First Name | Middle Name | Last Name | | |
| I Inited Cta | stoo Donkrijntoj. Court for the | NORTHERN DISTRICT | OF ILLINOIS | | |
| United Sta | ites Bankruptcy Court for the: | MORTILKIN DISTRICT | OF ILLINOIS | | |
| Case num | ber | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |
| o | . = | | | | |
| Officia | I Form 106H | | | | |
| Sched | lule H: Your Cod | ebtors | | | 12/15 |
| | | | | | |
| our name | and case number (if known |). Answer every question | | | of any Additional Pages, write |
| _ | | | | | |
| ■ No | | | | | |
| ☐ Yes | 3 | | | | |
| Arizor | hin the last 8 years, have you na, California, Idaho, Louisiana . Go to line 3. s. Did your spouse, former spo | , Nevada, New Mexico, Pu | erto Rico, Texas, Wash | | r states and territories include |
| in line Form out C | e 2 again as a codebtor only 106D), Schedule E/F (Officia olumn 2. Column 1: Your codebtor | if that person is a guaran I Form 106E/F), or Sched | tor or cosigner. Make | sure you have listed the office of the offic | g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt |
| | Name, Number, Street, City, State and Z | IP Code | | Check all schedule | s that apply: |
| 3.1 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, li | |
| | | | | ☐ Schedule G, line | |
| - | | | | | |
| | Number Street City | State | ZIP Code | | |
| | City | Sidle | ZIF Code | | |
| | | | | | |
| 3.2 | | | | Schedule D, line | |
| | Name | | | ☐ Schedule E/F, li | ne |
| | | | | ☐ Schedule G, line | · |
| - | Number Street | | | | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify your c | ase: | | | | | | | |
|-------------|---|----------------------------|--|-----------|------|------------------------|-------------------------------|-------------------------------------|---------|
| Del | otor 1 Julio Delreal | | | | | | | | |
| | otor 2 Juse, if filing) | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | |
| | se number | | _ | | | Check if this is: | | | |
| (If kr | nown) | | | | | An amende | | | |
| _ | (f) : 1 E | | | | | | | ing postpetition of following date: | chapter |
| | fficial Form 106l | | | | | MM / DD/ Y | YYY | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/15 |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t1: Describe Employment | r spouse is not filing wi | ith you, do not inclu | de infor | mati | on about your spo | ouse. If n | nore space is n | eeded, |
| ١. | information. | | | | | Debtor 2 | Debtor 2 or non-filing spouse | | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | | | | oyed | | |
| | information about additional | , ., | ☐ Not employed | | | ■ Not e | mployed | | |
| | employers. | Occupation | Outside Sales | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Charter Commun | nication | s | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 1265 John Q Ha 100 Madison, WI 537 | | | re | | | |
| | | How long employed t | here? 1.4 mor | nths | | | | | |
| Par | t 2: Give Details About Mor | nthly Income | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to r | eport for | any | line, write \$0 in the | space. Ir | nclude your non- | -filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the informatio | n for all | empl | oyers for that perso | n on the | lines below. If yo | ou need |
| | | | | | | For Debtor 1 | | ebtor 2 or iling spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 3,400.00 | \$ | 0.00 | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | 0.00 | |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | 4. | \$ | 3,400.00 | \$ | 0.00 | |

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| Debto | or 1 | Julio Delreal | | Case r | number (if known) | | | | |
|-------|-----------------|---|-------------|----------|-------------------|------------|-----------------|------|----------|
| | | | | For | Debtor 1 | | Debtor 2 | | |
| | Сор | y line 4 here | 4. | \$ | 3,400.00 | \$ | | 0.00 | |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. 5b. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans | 5a. 5b. | \$ | 721.00 | \$ | | 0.00 | - |
| | 5c. 5d. | Voluntary contributions for retirement plans Required repayments of retirement fund loans | 5c. 5d. | \$ | 212.00 48.00 | \$ \$ | | 0.00 | |
| | 5e. 5f. | Insurance Domestic support obligations | 5e. 5f. | \$ \$ | 162.00 0.00 | \$ \$ | | 0.00 | - |
| | 5g. 5h. | Union dues Other deductions. Specify: | 5g. 5h.+ | \$ | 0.00 | \$ - \$ | | 0.00 | - |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 1,143.00 | \$ | | 0.00 | _ |
| 7. | Calc | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 2,257.00 | \$ | | 0.00 | |
| | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends | 8a. 8b. | \$ | 0.00 | \$ \$ | | 0.00 | |
| | 8c. 8d. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation | 8c. 8d. | \$ \$ | 0.00 | \$ \$ | | 0.00 | - |
| | 8e. 8f. | Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8e. 8f. | \$ \$ | 0.00 | \$ \$ | | 0.00 | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | | 0.00 | |
| | 8h. | Other monthly income. Specify: | _ 8h.+ | \$ | 0.00 | +\$ | | 0.00 | = |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | | 0.00 | D |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. \$ | 2 | 2,257.00 + \$ | | 0.00 | = \$ | 2,257.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | | | | | , |
| | Inclu othe | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify: | depend | | • | | Schedule 11. | | 0.00 |
| | | the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain ies | | | | | 12. | \$ | 2,257.00 |
| 13. | Do y | you expect an increase or decrease within the year after you file this form | ? | | | | | | y income |
| | | No. Yes. Explain: | | | | | | | |

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| Fill | in this informa | ition to identify yo | onic case. | | | 1 | | | |
|------------|--|---------------------------------------|--------------------------------------|--|-----------------------|-------------|---------|----------------------------|-------------------------------|
| | | | our case. | | | | | | |
| Deb | tor 1 | Julio Delreal | | | | Cr | | this is: amended filing | |
| Deb | tor 2 | | | | | | As | upplement show | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | | 13 | expenses as of | the following date: |
| Unit | ed States Bankı | ruptcy Court for the | : NORTH | IERN DISTRICT OF ILLIN | OIS | | MN | 1/DD/YYYY | |
| 1 | e number | | | | | | | | |
| (If k | nown) | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | ı | | | |
| | | J: Your | Exper | ises | | | | | 12/1 |
| Be info | as complete ormation. If mathematic moder (if know | and accurate as | possible eded, atta ry questio | If two married people ar | | | | | r supplying correct |
| 1. | Is this a joir | | iloiu | | | | | | |
| | ■ No. Go to | line 2. | | | | | | | |
| | ☐ Yes. Doe | es Debtor 2 live | in a separ | ate household? | | | | | |
| | | | -+ t:l- Ott:-: | al Farra 400 L O. Farrance | fan Camanata Hawa | - | _ | 2 | |
| | | | st file Offici | al Form 106J-2, <i>Expenses</i> | r for Separate House | enoia of Di | eptor 2 | 2. | |
| 2. | • | e dependents? | ☐ No | | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relati | | _ | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | | □ No |
| | dependents | names. | | | Son | | | 11 months | Yes |
| | | | | | Son | | | 2 | □ No |
| | | | | | | | | | ■ Yes □ No |
| | | | | | Son | | | 7 | ■ Yes |
| | | | | | | | | | □ No |
| _ | _ | | | | Daughter | | | 10 | Yes |
| 3. | | oenses include f people other t | han | No | | | | | |
| | yourself and | d your depende | nts? ⊔ | Yes | | | | | |
| Par | | ate Your Ongoi | | | | | | | |
| exp | | | | uptcy filing date unless y y is filed. If this is a supp | | | | | |
| the | value of sucl | h assistance an | | government assistance i cluded it on <i>Schedule I:</i>) | | | | Your expe | enses |
| (Un | ficial Form 10 | ,ui.j | | | | | | | |
| 4. | | or home owners and any rent for th | | ses for your residence. In root. | nclude first mortgage | e 4. | \$_ | | 625.00 |
| | If not includ | led in line 4: | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 |
| | • | rty, homeowner's | | | | 4b. | | | 0.00 |
| | | maintenance, re owner's associat | • | ıpkeep expenses dominium dues | | 4c. 4d. | . – | | 0.00 |
| 5. | | | | our residence, such as ho | me equity loans | | \$ — | | 0.00 |

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| Debtor ' | Julio Delreal | Case num | ber (if known) | |
|----------------------|--|----------------------|----------------|----------------------------|
| 6. Ut i | lities: | | | |
| 6a | | 6a. | \$ | 250.00 |
| 6b | • | 6b. | \$ | 0.00 |
| 6c. | | 6c. | · | 100.00 |
| 6d | | 6d. | · | 0.00 |
| | od and housekeeping supplies | 7. | • | 300.00 |
| | ildcare and children's education costs | 7. 8. | \$ | |
| - | | | · | 0.00 |
| | othing, laundry, and dry cleaning | 9. | \$ | 50.00 |
| | rsonal care products and services | 10. | \$ | 0.00 |
| | dical and dental expenses | 11. | \$ | 50.00 |
| | ansportation. Include gas, maintenance, bus or train fare. | 12. | \$ | 300.00 |
| | not include car payments. | | · | |
| | tertainment, clubs, recreation, newspapers, magazines, and books | 13. | · - | 0.00 |
| | aritable contributions and religious donations | 14. | \$ | 0.00 |
| - | surance. | | | |
| | not include insurance deducted from your pay or included in lines 4 or 20. | 150 | ¢. | 0.00 |
| | a. Life insurance | 15a. | · | 0.00 |
| | b. Health insurance | 15b. | · | 0.00 |
| | c. Vehicle insurance | 15c. | | 0.00 |
| | d. Other insurance. Specify: | 15d. | \$ | 0.00 |
| 6. Ta | xes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| | ecify: | 16. | \$ | 0.00 |
| | tallment or lease payments: | | | |
| 17 | a. Car payments for Vehicle 1 | 17a. | \$ | 300.00 |
| 17 | o. Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17 | c. Other. Specify: | 17c. | \$ | 0.00 |
| 17 | d. Other. Specify: | 17d. | \$ | 0.00 |
| | ur payments of alimony, maintenance, and support that you did not report as | | | |
| | ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | | \$ | 272.00 |
| | ner payments you make to support others who do not live with you. | | \$ | 0.00 |
| Sp | ecify: | 19. | | |
| 20. Ot | ner real property expenses not included in lines 4 or 5 of this form or on Sch | edule I: Yo | our Income. | |
| 20 | a. Mortgages on other property | 20a. | \$ | 0.00 |
| 20 | o. Real estate taxes | 20b. | \$ | 0.00 |
| 20 | c. Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | d. Maintenance, repair, and upkeep expenses | 20d. | | 0.00 |
| | e. Homeowner's association or condominium dues | 20e. | · | 0.00 |
| _ | | 21. | · | |
| . i. Ut | ner: Specify: | | - φ | 0.00 |
| 22. Ca | Iculate your monthly expenses | | | |
| | a. Add lines 4 through 21. | | \$ | 2,247.00 |
| | b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | _, |
| | c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 2 247 00 |
| 22 | o. Add the ZZa and ZZb. The result is your monthly expenses. | | Φ | 2,247.00 |
| 23. Ca | Iculate your monthly net income. | | L | |
| | a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,257.00 |
| | c. Copy your monthly expenses from line 22c above. | 23b. | · | 2,247.00 |
| _0 | | | | ۷,۲۲۱.00 |
| 23 | Subtract your monthly expenses from your monthly income | | | |
| 20 | | 23c. | \$ | 10.00 |
| | | | <u> </u> | |
| 24. D o | you expect an increase or decrease in your expenses within the year after y | ou file this | form? | |
| Foi | example, do you expect to finish paying for your car loan within the year or do you expect you | | | e or decrease because of a |
| | dification to the terms of your mortgage? | | | |
| | No. | | | |
| | | | | |
| 23. Do For mo | c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . you expect an increase or decrease in your expenses within the year after y example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage? | 23c. ou file this | \$ form? | 10.0 |

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| Fill in this infor | rmation to identify your | case: | | | | |
|------------------------------------|--|--------------------------|--------------|---------------------|-------------------|--|
| Debtor 1 | Julio Delreal | | | | | |
| | First Name | Middle Name | Las | st Name | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Las | st Name | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINO | IS | | |
| Case number | | | | | | |
| (if known) | | | | | | Check if this is an amended filing |
| You must file th obtaining mone | | le bankruptcy schedules | s or amend | ed schedules. Mak | ing a false state | ement, concealing property, or 0, or imprisonment for up to 20 |
| Sig | gn Below | | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an atto | rney to help | you fill out bankr | uptcy forms? | |
| ■ No | | | | | | |
| ☐ Yes. | Name of person | | | | | cruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sum | nmary and s | schedules filed wit | h this declaratio | n and |
| X /s/ Juli | io Delreal | | Х | | | |
| | Delreal ure of Debtor 1 | | | Signature of Debte | or 2 | |
| Date | December 12, 2017 | | | Date | | |

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| Fill i | n this inform | nation to identify you | r case: | | | |
|-----------------|---|---|---|---|--|---|
| Debt | | Julio Delreal | ouse. | | | |
| Debi | .01 1 | First Name | Middle Name | Last Name | | |
| Debt | or 2 se if, filing) | First Name | Middle Neme | Last Name | | |
| ` ' | . 0, | | Middle Name | | | |
| Unite | ed States Bar | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Case (if kno | e number wn) | | | | _ | Check if this is an mended filing |
| Sta | | of Financial | Affairs for Individ | | | 4/16 |
| infori numb | mation. If moer (if knowr | ore space is needed, n). Answer every ques | attach a separate sheet to stion. | this form. On the top of any | equally responsible for sup | |
| Part 1. | | current marital statu | rital Status and Where You s? | Lived Belore | | |
| | ■ Married□ Not mar | ried | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. Lis | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | <i>ı</i> . | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territor ico, Texas, Washington and V | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Part | 2 Explai | n the Sources of You | r Income | | | |
| l | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receiv | all businesses, including part- | | ndar years? |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$37,403.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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Case number (if known) Debtor 1 Julio Delreal

| | | | | Debtor 1 | | Debtor 2 | |
|----|--|--|--|--|---|--|--|
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inco | |
| | or last caler anuary 1 to | | 31, 2016) | ■ Wages, commissions, bonuses, tips | \$17,064.00 | ☐ Wages, comr bonuses, tips | nissions, |
| | | | | ☐ Operating a business | | Operating a b | pusiness |
| 5. | Include in and other winnings. | come regard public bene If you are fil | dless of wheth fit payments; ing a joint cas | | amples of other income are a rest; dividends; money colled you received together, list it | alimony; child suppo cted from lawsuits; r only once under Del | |
| | _ | | | | | | |
| | No | | | | | | |
| | Yes. | Fill in the de | etails. | | | | |
| | | | | Debtor 1 | | Debtor 2 | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of inco | Ome Gross income (before deductions and exclusions) |
| De | w 2. Lie | Cartain Da | | Made Before Ven Filed for | Dankauntau | | |
| Г | ert 3: List | Certain Fa | iyiileiits rou | Made Before You Filed for | Ванктирісу | | |
| 6. | □ No. | Neither De individual | ebtor 1 nor D primarily for a | 's debts primarily consume bebtor 2 has primarily consuments, personal, family, or househouse you filed for bankruptcy, d | umer debts. Consumer deb ld purpose." | | U.S.C. § 101(8) as "incurred by an |
| | | □ No. | Go to line 7 | | la you pay arry creditor a tota | al OI \$0,425 OI IIIOR | 5 ! |
| | | □ No. | | | id a total of ¢6 125* or mara | in one or more never | ments and the total amount you |
| | | | paid that cre not include | | nts for domestic support obli his bankruptcy case. | gations, such as chi | ld support and alimony. Also, do |
| | _ | | | | | . or ano. and date of | |
| | ■ Yes. | | | r both have primarily consure you filed for bankruptcy, d | | al of \$600 or more? | |
| | | ■ No. | Go to line 7 | • | | | |
| | | □ Yes | include pay | each creditor to whom you pa ments for domestic support o this bankruptcy case. | | | rou paid that creditor. Do not llso, do not include payments to an |
| | Creditor | 's Name an | d Address | Dates of payme | ent Total amount | Amount you | Was this payment for |
| | | | | , , | paid | still owe | |
| 7. | Insiders in of which y a business alimony. | iclude your i ou are an of | relatives; any fficer, director | | any general partners; partners of 20% or more of their voting | erships of which you g securities; and any | are a general partner; corporations y managing agent, including one for |
| | | Liet ell se: | nonto to on !- | oidor | | | |
| | | Name and | nents to an in Address | Dates of payme | ent Total amount | Amount you | Reason for this payment |
| | | | | | naid | still owe | |

| Debtor 1 | Julio Delreal | Document Page 35 of 52 Case number (if known) |
|----------|---------------|---|
|----------|---------------|---|

| 8. | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. | | | | | | | | |
|-----|---|-------------------------|----------------------|----------------------|-------------------------|-----------------------------|--|--|--|
| | ■ No | | | | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment itor's name | | | |
| Par | t 4: Identify Legal Actions, Repossessio | ns, and Foreclosures | | | | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. | | | | | | | | |
| | ■ No□ Yes. Fill in the details. | | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | e case | | | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo | | rty repossessed, f | oreclosed, garn | ished, attached | d, seized, or levied? | | | |
| | No. Go to line 11. Yes. Fill in the information below. | | | | | | | | |
| | Creditor Name and Address | Describe the Property | | Dat | е | Value of the | | | |
| | | | • | | | property | | | |
| | | Explain what happened | | | | | | | |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details. | | uding a bank or fir | nancial institutio | on, set off any a | mounts from your | | | |
| | Creditor Name and Address | Describe the action the | creditor took | Dat | e action was | Amount | | | |
| | | | | take | | 7 | | | |
| 12. | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No | | | | | | | | |
| | ☐ Yes | | | | | | | | |
| Par | t 5: List Certain Gifts and Contributions | | | | | | | | |
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. | | | | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | | es you gave gifts | Value | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | |
| 14. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or cor | | s or contributions v | with a total valu | e of more than | \$600 to any charity? | | | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | tal Describe what you | contributed | | es you tributed | Value | | | |
| Par | t 6: List Certain Losses | | | | | | | | |
| | | | | | | | | | |

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Case 17-82919 Doc 1 Filed 12/13/17 Entered 12/13/17 10:59:54 Desc Main Page 36 of 52 Case number (if known) Document Debtor 1 Julio Delreal or gambling? Nο Yes. Fill in the details. Describe any insurance coverage for the loss Describe the property you lost and Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Balsley & Dahlberg Attorney Fees December 12, \$500.00 5130 North Second Street 2017 Loves Park, IL 61111 promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who

| No |
|----|
| |

Yes. Fill in the details.

| Person Who Was Paid | Description and value of any property | Date payment | Amount of |
|---------------------|---------------------------------------|-----------------|-----------|
| Address | transferred | or transfer was | payment |
| | | made | |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Nο

| Yes. Fill in the details. | | | |
|---|---|--|------------------------|
| Person Who Received Transfer Address Person's relationship to you | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
| | | | |

Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Yes. Fill in the details.

Name of trust Description and value of the property transferred **Date Transfer was** made

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Case number (if known) Document

Debtor 1 Julio Delreal

| | | List of Certain Financial Accounts, Ins | • | | • | | our honofit alassa |
|---|--|--|--|-------------------|-------------|--|---|
| 20. | sold Incl | nin 1 year before you filed for bankruptod, moved, or transferred? ude checking, savings, money market, o ses, pension funds, cooperatives, assoo | or other financial accou | nts; certificates | s of depos | | |
| | | No Yes. Fill in the details. | | | | | |
| | | me of Financial Institution and dress (Number, Street, City, State and ZIP le) | Last 4 digits of account number | Type of acco | unt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | | you now have, or did you have within 1 y h, or other valuables? | year before you filed for | r bankruptcy, a | ny safe de | posit box or other depos | sitory for securities, |
| | | No Yes. Fill in the details. | | | | | |
| | | me of Financial Institution dress (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? |
| 22. | Hav | e you stored property in a storage unit o | or place other than your | r home within 1 | year befo | re you filed for bankrupt | cy? |
| | | Yes. Fill in the details. | | | | | |
| | | me of Storage Facility dress (Number, Street, City, State and ZIP Code) | Who else has or I to it? Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? |
| Par | t 9: | Identify Property You Hold or Control | for Someone Else | | | | |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | | |
| | | No | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | rner's Name dress (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | Value |
| Par | t 10: | Give Details About Environmental Info | ormation | | | | |
| For | the p | ourpose of Part 10, the following definition | ons apply: | | | | |
| Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous of toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | | |
| | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | | |
| | | ardous material means anything an env ardous material, pollutant, contaminant, | | as a hazardous | s waste, ha | azardous substance, tox | c substance, |
| Rep | ort a | II notices, releases, and proceedings the | at you know about, rega | ardless of wher | n they occ | urred. | |
| 24. | Has | any governmental unit notified you that | t you may be liable or p | otentially liable | under or | in violation of an enviror | mental law? |
| | ■ No | | | | | | |
| | | Yes. Fill in the details. | | | | | |

Name of site

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Date of notice

Environmental law, if you

know it

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| 25. | Have you notified any governmental unit of | any release of hazardous material? | | | | | |
|-----------------------|---|---|--|--------------------|--|--|--|
| | ■ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 26. | Have you been a party in any judicial or adm | ninistrative proceeding under any envir | onmental law? Include settlements a | and orders. | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | |
| Par | 11: Give Details About Your Business or 0 | Connections to Any Business | | | | | |
| 27. | Within 4 years before you filed for bankrupto | cy, did you own a business or have an | y of the following connections to any | / business? | | | |
| | ☐ A sole proprietor or self-employed in | n a trade, profession, or other activity, | either full-time or part-time | | | | |
| | ☐ A member of a limited liability compa | any (LLC) or limited liability partnershi | p (LLP) | | | | |
| | ☐ A partner in a partnership | | | | | | |
| | ☐ An officer, director, or managing exe | ecutive of a corporation | | | | | |
| | ☐ An owner of at least 5% of the voting | g or equity securities of a corporation | | | | | |
| | ■ No. None of the above applies. Go to Part 12. | | | | | | |
| | Yes. Check all that apply above and fill in the details below for each business. | | | | | | |
| | Business Name | Employer Identification number | | | | | |
| | Address (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Do not include Social Security Dates business existed | number or ITIN. | | | |
| 28. | Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties. | cy, did you give a financial statement to | o anyone about your business? Inclu | ude all financial | | | |
| | ■ No | | | | | | |
| | Yes. Fill in the details below. | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | | | | |
| Par | 12: Sign Below | | | | | | |
| are t with 18 U | e read the answers on this <i>Statement of Fin</i> rue and correct. I understand that making a fa bankruptcy case can result in fines up to \$ S.C. §§ 152, 1341, 1519, and 3571. | false statement, concealing property, o | or obtaining money or property by fra | | | | |
| | o Delreal | Signature of Debtor 2 | | | | | |
| Sig | nature of Debtor 1 | | | | | | |
| Dat | December 12, 2017 | Date | | | | | |
| _ | ou attach additional pages to Your Stateme | nt of Financial Affairs for Individuals F | iling for Bankruptcy (Official Form 10 | 07)? | | | |
| ■ N | | | | | | | |
| Did : | rou pay or agree to pay someone who is not | an attorney to help you fill out bankru | ptcy forms? | | | | |
| ПΥ | es. Name of Person Attach the <i>Bankrup</i> | otcy Petition Preparer's Notice, Declaration | | page 6 | | | |

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Case number (if known) Document

Debtor 1 Julio Delreal

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| | | 200 | amont 1 ago 10 01 02 | |
|---------------------------------|--|-----------------------|---|---|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Julio Delreal | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| | ankruptcy Court for the: | | TRICT OF ILLINOIS | |
| Officed States Di | ankruptcy Court for the. | NOITHERN DIO | TRIOT OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |
| Official Fo | | n for Indiv | viduals Filing Under Chapt | er 7 12/15 |
| If you are an inc | dividual filing under cha | pter 7, you must fil | l out this form if: | |
| creditors have | ve claims secured by yo | ur property, or | | |
| You must file th | ever is earlier, unless th | ithin 30 days after | ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to the | |
| | people are filing together and date the form. | r in a joint case, bo | th are equally responsible for supplying correct | information. Both debtors must |
| | and accurate as possib | | s needed, attach a separate sheet to this form. Or | n the top of any additional pages, |
| Part 1: List Y | our Creditors Who Hav | e Secured Claims | | |
| • | _ | art 1 of Schedule D | : Creditors Who Have Claims Secured by Proper | ty (Official Form 106D), fill in the |
| information b | pelow. reditor and the property t | hat is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| Creditor's | | | ☐ Surrender the property. | □No |
| name: | | | ☐ Retain the property and redeem it. | □ 100 |
| | | | ☐ Retain the property and enter into a | ☐ Yes |
| Description of property | ıt | | Reaffirmation Agreement. | |
| securing debt | t: | | ☐ Retain the property and [explain]: | |
| | | | | |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | ☐ Yes |
| Description of | ıf | | ☐ Retain the property and enter into a Reaffirmation Agreement. | ப 165 |
| property | | | ☐ Retain the property and [explain]: | |
| securing debt | t: | | forbiand. | |

Official Form 108

Creditor's

Creditor's

Description of

securing debt:

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Surrender the property.

☐ Retain the property and redeem it.

 $\hfill\square$ Retain the property and enter into a

☐ Retain the property and [explain]:

Reaffirmation Agreement.

□ No

☐ Yes

☐ No

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| Debtor 1 Julio Delreal | Case number (if | Case number (if known) | | | |
|---|--|---|--|--|--|
| name: | ☐ Retain the property and redeem it. | ☐ Yes | | | |
| Description of | Retain the property and enter into a | | | | |
| property | Reaffirmation Agreement. Retain the property and [explain]: | | | | |
| securing debt: | — Retain the property and [explain]. | | | | |
| Part 2: List Your Unexpired Personal | Property Leases | | | | |
| in the information below. Do not list real | se that you listed in Schedule G: Executory Contracts and Une estate leases. Unexpired leases are leases that are still in effect property lease if the trustee does not assume it. 11 U.S.C. § 36 | ct; the lease period has not yet ended. | | | |
| Describe your unexpired personal prope | erty leases | Will the lease be assumed? | | | |
| Lessor's name: | | □ No | | | |
| Description of leased Property: | | ☐ Yes | | | |
| Lessor's name: Description of leased | | □ No | | | |
| Property: | | ☐ Yes | | | |
| Lessor's name: Description of leased | | □ No | | | |
| Property: | | ☐ Yes | | | |
| Lessor's name: Description of leased | | □ No | | | |
| Property: | | ☐ Yes | | | |
| Lessor's name: Description of leased | | □ No | | | |
| Property: | | ☐ Yes | | | |
| Lessor's name: Description of leased | | □ No | | | |
| Property: | | ☐ Yes | | | |
| Lessor's name: Description of leased | | □ No | | | |
| Property: | | ☐ Yes | | | |
| Part 3: Sign Below | | | | | |
| Under penalty of perjury, I declare that I I property that is subject to an unexpired I | nave indicated my intention about any property of my estate the | at secures a debt and any personal | | | |
| X /s/ Julio Delreal | X | | | | |
| Julio Delreal | Signature of Debtor 2 | | | | |
| Signature of Debtor 1 | | | | | |
| Date December 12, 2017 | Date | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-82919 Doc 1 Filed 12/13/17 Entered 12/13/17 10:59:54 Desc Main Document Page 46 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Julio Delreal | | | Case No. | | |
|-------------|--|---|---|---|--|----------------|
| | | | Debtor(s) | Chapter | 7 | |
| | DISCL | OSURE OF COMPI | ENSATION OF ATTOR | NEY FOR DE | EBTOR(S) | |
| C | compensation paid to me | within one year before the fi | 16(b), I certify that I am the attorney ling of the petition in bankruptcy, on n of or in connection with the bankr | r agreed to be paid | to me, for services re | |
| | For legal services, I | have agreed to accept | | . \$ | 500.00 | |
| | | | d | | 500.00 | |
| | Balance Due | | | . \$ | 0.00 | |
| 2. \$ | 335.00 of the filing | ng fee has been paid. | | | | |
| 3. | The source of the compen | nsation paid to me was: | | | | |
| | ■ Debtor □ | Other (specify): | | | | |
| 4. 7 | The source of compensat | tion to be paid to me is: | | | | |
| | ■ Debtor □ | Other (specify): | | | | |
| 5. | ■ I have not agreed to s | share the above-disclosed con | mpensation with any other person ur | nless they are mem | bers and associates of | f my law firm. |
| l | | | nsation with a person or persons wh names of the people sharing in the co | | | aw firm. A |
| 6.] | In return for the above-d | sisclosed fee, I have agreed to | render legal service for all aspects | of the bankruptcy c | ase, including: | |
| t c | Preparation and filing Representation of the [Other provisions as r Negotiations w agreements ar | g of any petition, schedules, st debtor at the meeting of cred needed] vith secured creditors to red | dering advice to the debtor in deter- tatement of affairs and plan which n litors and confirmation hearing, and duce to market value; exemption preparation and filing of motions | nay be required; any adjourned hea planning; prepar | rings thereof; ation and filing of re | eaffirmation |
| 7. I | | n of the debtors in any disc | fee does not include the following s chargeability actions, judicial lien | | of from stay actions | or any other |
| | | | CERTIFICATION | | | |
| | certify that the foregoin ankruptcy proceeding. | ig is a complete statement of a | any agreement or arrangement for p | ayment to me for r | epresentation of the d | ebtor(s) in |
| D | ecember 12, 2017 | | /s/ Jeffry A Dahlberg |] | | |
| D_{i} | ate | | Jeffry A Dahlberg | | | |
| | | | Signature of Attorney Balsley & Dahlberg | | | |
| | | | 5130 North Second | | | |
| | | | Loves Park, IL 6111 | 1 | | |
| | | | Name of law firm | | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In re: Julio Delreal Case No.: 17-

Judge Thomas M Lynch

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 7 DEBTORS AND THEIR ATTORNEYS

BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case as required by Local Bankruptcy Rule and explain how and when the attorney's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, statements and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, statements and schedules.
- 5. Advise the debtor of the need to maintain appropriate insurance.

AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

1. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card

does not include the debtor's social security number, the debtor will also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.

- 2. Notify the attorney of any change in the debtor's address or telephone number.
- 3. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 4. Contact the attorney immediately if the debtor loses employment, has a significant change in income or experiences any other significant change in financial situation (such as serious illness, lottery winnings or an inheritance).
- 5. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 6. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the Internal Revenue Service or the Illinois Department of Revenue.
- 7. Contact the attorney before selling real property while the bankruptcy is pending.
- 8. Pay all fees for amendments in a timely fashion.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination).
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 7 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely prepare, file and serve any necessary amended statements and schedules and any change of address in accordance with information provided by the debtor.
- 7. Monitor all incoming case information.

- 8. Prepare, file and serve all appropriate motions to avoid liens.
- 9. Provide any other legal services necessary for the administration of the case before the Bankruptcy Court.
- 10. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 11. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise not engaging in proper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 12. The services to be provided by the attorney specifically exclude the representation in any adversary proceeding filed by any creditor.

| Date: | December | 12, | 2017 | |
|-------|----------|-----|------|--|
| | | | | |

Total fee to be paid for attorney's services:

| \$ 500.00 | |
|-------------------------------------|--|
| (Do not sign if this line is blank) | |

any current child support/alimony obligation that I may have.

I understand that I may be subject to a random audit conducted by a private audit firm pursuant to §603 of the Bankruptcy Code and will have to produce certain documents which may include pay stubs for the six (6) calendar months prior to filing; two years of federal tax returns, including any schedules and forms; account statements for all depository and investment accounts for six calendar months preceding the date of filing of the petition, plus the month in which the petition was filed, along with sufficient documentation to reasonably explain the source of deposits or credits and the purpose of checks, withdrawals or debits and a copy of any divorce decree and/or property settlement entered within the last three years and

Signed:

ulio Delreal, Debtor

Jeffry A Dahlberg, Attorney for Debtor(s).

BALSLEY & DANLBERG 5130 North Second Street Loves Park, IL 61111-5002

815-877-2593

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United States Bankruptcy Court Northern District of Illinois

| In re | Julio Delreal | | Case No. | |
|-------|--|---|-----------------------------|----------------|
| | | Debtor(s) | Chapter 7 | |
| | VE | RIFICATION OF CREDITOR M | IATRIX | |
| | | Number of | f Creditors: | 20 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credi | tors is true and correct to | the best of my |
| Date: | December 12, 2017 | /s/ Julio Delreal Julio Delreal Signature of Debtor | | |

AFNI P.O. Box 3427 Bloomington, IL 61702-3517

AR Concepts 18 E Dundee Road, Suite 330 Barrington, IL 60010

ATG Credit Inc. P.O. Box 14895 Chicago, IL 60614-0895

Berks Credit Collection 900 Corporate Drive Reading, PA 19605

CBE Group 1309 Technology Pkwy Cedar Falls, IA 50613

Chase Bank 340 S Cleveland Ave Bldg 370 Westerville, OH 43081

Chase Card P.O. Box 15298 Wilmington, DE 19850

Commonwealth Edison Company Attention: Legal Department 3 Lincoln Center, 4th Floor Oak Park Terrace, IL 60181-4204

Creditors' Protection Service 308 W State St Suite 485 P.O. Box 4115 Rockford, IL 61110-0615

Crusader Clinic 1200 West State Street Rockford, IL 61102

Hy Cite Corporation/Royal Prestige 333 Hofman Road Madison, WI 53713

I.C. Systems Inc 444 East Highway 96 P.O. Box 64437 Saint Paul, MN 55164-0437

Johnny's Auto Sales 1529 Harrison Avenue Rockford, IL 61104

Mutual Management Services Inc 7177 Crimson Ridge Drive, Suite 10 P.O. Box 8740 Rockford, IL 61126-6235

OSF St. Anthony Medical Group 5666 E. State Street Rockford, IL 61108-2472

R & B Receivables Management 860 Northpoint Blvd. Waukegan, IL 60085

Rockford Mercantile Agency Inc 2502 S. Alpine Road Rockford, IL 61108

Secretary of State Traffic Unit 2701 South Dirksen Parkway Springfield, IL 62723

State Collection Service 2509 S. Stoughton Road Madison, WI 53716

Wilber & Associates, P.C. 210 Landmark Drive Normal, IL 61761